

## **Application Data Sheet**

### **Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Title:: Systems and Methods for Wireless Communications

Attorney Docket Number:: MTV-020.03 (20021-2003)

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 5

Small Entity:: No

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.::

### **Applicant Information**

Applicant Authority type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Vanu

Middle Name::

Family Name:: Bose

Name Suffix::

City of Residence:: Cambridge

State or Province of Residence:: Massachusetts  
Country of Residence:: United States  
Street of mailing address:: Apartment 11-21A, 100 Memorial Drive  
City of mailing address:: Cambridge  
State or Province of mailing address:: MA  
Country of mailing address:: United States  
Postal or Zip Code of mailing address:: 02139

#### **Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: David  
Middle Name:: L.  
Family Name:: Tennenhouse  
Name Suffix::  
City of Residence:: Chevy Chase  
State or Province of Residence:: Maryland  
Country of Residence:: United States  
Street of mailing address:: 7717 Curtis Street  
City of mailing address:: Chevy Chase  
State or Province of mailing address:: Maryland  
Country of mailing address:: United States  
Postal or Zip Code of mailing address:: 20815

#### **Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: John  
Middle Name:: C.  
Family Name:: Guttag

Name Suffix::

City of Residence:: Lexington

State or Province of Residence:: Massachusetts

Country of Residence:: United States

Street of mailing address:: 273 Emerson Road

City of mailing address:: Lexington

State or Province of mailing address:: Massachusetts

Country of mailing address:: United States

Postal or Zip Code of mailing address:: 02173

### **Applicant Information**

Applicant Authority type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Michael

Middle Name::

Family Name:: Ismert

Name Suffix::

City of Residence:: Chestnut Hill

State or Province of Residence:: Massachusetts

Country of Residence:: United States

Street of mailing address:: Apartment 1, 327 Hammond Pond Parkway

City of mailing address:: Chestnut Hill

State or Province of mailing address:: Massachusetts

Country of mailing address:: United States

Postal or Zip Code of mailing address:: 02167

### **Applicant Information**

Applicant Authority type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Matthew

Middle Name::  
Family Name:: Welborn  
Name Suffix::  
City of Residence:: Cambridge  
State or Province of Residence:: Massachusetts  
Country of Residence:: United States  
Street of mailing address:: Apt. J-3, 280 Vassar St  
City of mailing address:: Cambridge  
State or Province of mailing address:: Massachusetts  
Country of mailing address:: United States  
Postal or Zip Code of mailing address:: 02139

#### **Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Alok  
Middle Name:: B.  
Family Name:: Shah  
Name Suffix::  
City of Residence:: Somerville  
State or Province of Residence:: Massachusetts  
Country of Residence:: United States  
Street of mailing address:: Apt. 302, 23 Elm St  
City of mailing address:: Somerville  
State or Province of mailing address:: Massachusetts  
Country of mailing address:: United States  
Postal or Zip Code of mailing address:: 02143

#### **Correspondence Information**

Correspondence Customer Number:: 25181

**Representative Information**

Representative Customer Number::	25181
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
<b>This application</b>	<b>Continuation of</b>	<b>09/231,335</b>	<b>01-13-1999</b>
<b>09/231,335</b>	<b>An application claiming the benefit under 35 USC 119(e)</b>	<b>60/071,485</b>	<b>01-13-1998</b>

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::